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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/613,715	
	Filing Date	Jul 3, 2003	
	First Named Inventor	McCracken, Robert	
	Art Unit	3635	
	Examiner Name	Katcheves	
Total Number of Pages in This Submission	5	Attorney Docket Number	8594560/41960

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Davis, Brown, Koehn, Shors & Roberts, P.C.		
Signature			
Printed name	Emily E. Harris		
Date	March 24, 2005	Reg. No.	56201

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Typed or printed name	Jeri D. Krutsinger	Date	March 24, 2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of	)	
	)	Group Art Unit: 3635
Robert McCracken	)	
	)	
Serial No. 10/613,715	)	Examiner: Basil S. Katcheves
Filed: 7/03/2003	)	
For: REDUCED FRICTION FOR	)	
SHORING APPARATUS	)	
	)	

AMENDMENT

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Arlington, VA. 22313-1450

Dear Sir:

In the matter of the above-identified patent application, and in response to the Office Action mailed January 25, 2005, kindly enter the following amendments and consider the following remarks relative to the continued examination of the patent application.

Amendments to the Claims start on page 2 of this response.

Remarks start on page 4 of this response.